

EMPLOYEE TRANSPORTATION SURVEY

Dear Employee,

_____ is participating in an Employer Trip Reduction Program with the Regional Transportation Commission to reduce the number of vehicles trips to the work place. This program will improve air quality and reduce traffic congestion by encouraging use of carpools, vanpools, and Citifare.

Completion of this survey form will not place you under any obligation, and all information is confidential and will be treated accordingly.

A) Home Information

1. Name _____
2. Home Address _____
3. City _____ 4. Zip Code _____

B) Work Schedule Information

(example: 8:30 a.m.)

5. Begin Work [] [] : [] [] [] .m. End Work [] [] : [] [] [] .m.

C) Commute Information

6. I normally get to work:
Drive Alone Carpool Citifare Walk Other
[] [] [] [] []
7. My commute is approximately ____ miles, one direction.
8. If interested in carpools, indicate appropriate box:
Driver Passenger Not
(have own car) (don't have car) Interested
[] [] []
9. Would you be interested in a vanpool if the monthly cost was \$85 per month? [] yes [] no
10. If interested in a vanpool, which would you prefer to be:
[] Driver/Coordinator [] Backup Driver [] Passenger
11. My vehicle is parked:
[] in employer-provided parking
[] in private parking lot (non-employer)
[] in metered public parking
[] other
12. My average daily parking cost is \$ _____